

MINUTES
of the First Meeting of the
Licensed Practical Nurses' Technical Review Committee

September 7, 2016
1:00 p.m. to 4:00 p.m.
Lower Level Conference Room "F"
The Nebraska State Office Building, Lincoln, NE

Members Present

Debra Parsow (Chairperson)
Su Eells
Benjamin Greenfield, Perfusionist
Brandon Holt, BSRT (ARRT)
Jane Lott, RDH, BS
Lisa Pfeil
James Temme, RT

Members Absent

Staff Present

Matt Gelvin
Marla Scheer
Ron Briel

I. Call to Order, Roll Call, Approval of the Agenda

Ms. Parsow called the meeting to order at 1:00 p.m. The roll was called; a quorum was present. She welcomed all attendees and asked the committee members to introduce themselves. The agenda and Open Meetings Law were posted and the meeting was advertised online at http://dhhs.ne.gov/Pages/reg_admcr.aspx. The committee members unanimously approved the agenda for the first meeting.

The committee members unanimously agreed to adopt the following method of notifying the public about the date, time, and content of their meetings:

- Agendas for these meetings are posted on the Credentialing Review component of the Department of Health and Human Services website, and can be found at http://dhhs.ne.gov/Pages/reg_admcr.aspx
- Agendas for these meetings are posted on the Licensure Unit bulletin board located on the northeast corner of the first floor of the Nebraska State Office Building near the receptionist's area of the Licensure Unit.

II. Scheduling an Additional Meetings

The committee members selected the following dates and times for future meetings:

Wednesday, October 5, 2016 from 1:00 pm to 4:00 pm
Wednesday, November 2, 2016 from 1:00 pm to 4:00 pm
Thursday, December 1, 2016 from 1:00 pm to 4:00 pm
Wednesday, January 4, 2016 from 1:00 pm to 4:00 pm
Wednesday, February 1, 2016 from 1:00 pm to 4:00 pm

III. Orientation of the Committee Members to the Credentialing Review Program

Ms. Parsow introduced program staff for the purpose of orienting the committee members to the Credentialing Review Program. Mr. Briel and Mr. Gelvin conducted the orientation. A copy of this presentation was made available to the committee members at the beginning of the meeting.

IV. Presentation of the Application by the Applicant Group

Maxine Guy, LPN, and current President of the Nebraska Board of Nursing, came forward to present the proposal on behalf of the applicant group which is the Nebraska Board of Nursing. Ms. Guy stated that the proposal would delete the current specific credential for LPN-C and create a provision for basic IV therapy for LPNs under the existing Nurse Practice Act.

Currently, only RNs and those LPNs who have completed a special state approved certification program to become LPN-Cs can provide IV therapy, and LPN-C practice is limited to select medications and activities. This situation has created confusion regarding the role of LPNs in providing IV therapy. The proposal would more clearly define the role of LPNs in providing this kind of therapy, enhance patient safety, and result in more efficient utilization of LPN services.

The current situation has also created confusion with LPNs who either have a multistate license or who have come to Nebraska from a state that allows LPNs to provide IV therapy to apply for licensure in Nebraska. Furthermore, the current NCLEX-PN licensure examination tests for IV therapy as a component of basic LPN knowledge and skill.

Historically, LPNs were able to provide IV therapy in Nebraska. This was changed during the 1980's. Then in 2007 Nebraska created a specific certification and role for the LPN in IV therapy, namely, the LPN-C.

The Board of Nursing has put forward a proposal that will enhance the utilization of LPNs in long term care, home care and clinic settings, as well as in critical access hospitals. This proposal would streamline the scope of practice of LPNs and end the current confusion regarding what LPNs are able to do vis-à-vis IV therapy in Nebraska.

V. Questions by the Committee Members for the Applicant Group

Mr. Temme asked the applicants if current LPN education covers IV therapy. Ms. Guy responded that it does not cover all of it. Ms. Guy went on to state that nursing schools are already prepared to incorporate the education and training needed for LPNs to provide IV therapy as soon as the proposal passes. Mr. Temme asked Ms. Guy if the Board of Nursing is in favor of this proposal. Ms. Guy responded in the affirmative.

Mr. Greenfield asked the applicants if the proposal would include new education and training for those LPNs who have been educated under the current practice situation, or whether they would simply be grandfathered into the new scope of practice without additional education or training. There being no clear response to this question from the applicants, Mr. Greenfield and Ms. Pfeil asked the applicants how the proposal would protect the public from those currently practicing LPNs who have not received the necessary education and training in IV therapy, given that they too, apparently, would be allowed to provide IV services if the proposal were to pass. Mr. Greenfield went on to state that those practitioners who might be inclined to practice beyond their

education and training even under current circumstances would now be emboldened to continue to do so given the 'green light' to do so provided by the proposal. Mr. Holt agreed with Mr. Greenfield, adding that it is common knowledge that there are practitioners in every field of health care who, under some circumstances, are willing to take the risk of practicing beyond their education and training. The applicants' proposal would make it easier for these kinds of practitioners to continue, or perhaps even elaborate on, such risky practice. Mr. Holt went on to comment that the applicants need to make changes in their proposal to address this matter for the sake of public protection.

Ms. Pfeil asked the applicants how many LPNs want or need the proposed changes given that only about 600 of the 6000 or more LPNs in Nebraska have pursued the LPN-C credential. Ms. Parsow commented that it seems as if the proposal is asking the majority of LPNs to satisfy the needs of a minority of LPN practitioners. Karen Weidner, an applicant spokesperson, responded that remote rural areas in Nebraska have a great need for more nurses with the ability to provide IV therapy, and that this proposal would help to address this need. Ms. Eells asked the applicants to discuss the situation of employers who do not choose to utilize their LPNs to provide IV therapy. Ms. Weidner responded that even in this situation it is better to have LPNs who know how to safely provide IV therapy in case there is an emergency situation wherein such care is necessary and no one other than an LPN is present to provide it. Mr. Greenfield responded that what the applicants are trying to do is good, but that it would be a mistake to get rid of the education and training associated with the LPN-C credential, adding that keeping the latter would address the need to educate and train those LPNs who currently lack such education and training, thereby protecting the public from harm if the applicants' proposal were to pass. Mr. Greenfield then asked whether the applicants would consider amending their proposal to preserve the current LPN-C education, training, and testing for the sake of public protection.

VI. Comments by Representatives of Other Groups

Elizabeth Hurst, JD, commenting on behalf of the Nebraska Hospital Association, stated that one idea for addressing the apparent gap in the education and training of LPNs pertinent to IV therapy would be to delineate a grandfathering period in the proposal wherein those LPNs who have not yet been educated and trained in IV therapy would be given a certain amount of time to complete this education and training. Gina Ragland, commenting on behalf of the Nebraska Medical Association, stated that she agreed with Ms. Hurst's comments and that this grandfathering approach has been used before by other professions such as optometry, for example, to address concerns about practitioners whose education and training needed to be upgraded to meet the standards of a new scope of practice.

A representative of the Nebraska Healthcare Association commented that her organization is currently in the process of polling its members to get their input on the LPN proposal. This representative went on to say that she too has concerns about the impact of the proposal on those LPNs who currently lack the education and training to safely perform the additional duties associated with IV therapy, and added that it would be preferable to continue the current credentialing situation for LPNs and LPN-Cs rather than approve the applicants' proposal as it is now.

VII. Additional Questions by Committee Members for the Applicant Group

Ms. Parsow asked her committee members for their thoughts about a possible amendment to the proposal and about how best to present such an idea to the applicant group. Mr. Greenfield stated that one idea would be to advise the applicants to use a sunset concept to address concerns raised. Mr. Temme asked the applicants whether IV therapy was once a part of LPN scope of practice and if so why it was removed. An applicant representative responded that it was once part of LPN scope of practice and it is not entirely clear why it was removed. Mr. Greenfield asked the applicants why pass a proposal that makes the majority of LPNs get education and training they don't intend to use. Mr. Holt commented that one idea for an amendment would be to create a tier-based credentialing process for LPNs whereby there would be only one overall license for them but with opportunities to improve skills and competencies by creating specialty certifications, for example. Ms. Weidner commented that the committee members need to be aware that many nurses who might seek to work in Nebraska are credentialed through multistate compacts which for the most part already allow LPNs to provide IV therapy, and that, given the current restrictive environment vis-à-vis this scope element, it is hard to imagine an LPN credentialed this way coming to practice in Nebraska.

Mr. Greenfield summarized committee concerns about the proposal as being 1) making Nebraska's laws on LPN scope of practice consistent with those of our regional multistate compact, and 2) addressing the need to ensure competency of all LPNs in Nebraska to safely and effectively perform all of the new scope elements being proposed by the applicant group.

Applicant group representatives responded that they would communicate these committee concerns to the Board of Nursing for their consideration, and that they would make it their goal to submit amended language to the committee members in advance of their October 5, 2016 committee meeting.

VIII. Next Steps

The next step in the review process on this proposal is to continue examining the proposal utilizing the six statutory criteria for scope of practice criteria.

IX. Other Business and Adjournment

There being no further business, the committee members unanimously agreed to adjourn the meeting at 3:00 p.m.